

PUBLIC HEALTH COMMITTEE

March 20, 2013

RAISED BILL No. 6391 AAC THE PRACTICE OF ADVANCED PRACTICE REGISTERED NURSES.

Testimony of Lenore Smith Crosson, MSN, APRN IN SUPPORT OF RAISED BILL No. 6391

Senator Gerratana, Representative Johnson, and members of the Committee

As a practicing Family Nurse Practitioner in the State of Connecticut I am asking for your support of the above Raised Bill No. 6391. The request is to change the language of our State's current Nurse Practice Act from requiring a formal 'collaborative agreement' with a specified physician in order to provide the healthcare that we were trained and educated to give. By removing this requirement will in no way change the way we practice as a profession. It will just remove a barrier that keeps us from practicing to our full potential for our patients.

I have been a RN since 1993 and a practicing Nurse Practitioner since 2000. Throughout these years of working as a clinician, first as an ICU Nurse to now in the field of Dermatology, I have always collaborated with other healthcare professionals, when necessary, to ensure the utmost quality of care was being provided to my patients. It has not always been the same professional that needed to be collaborated with, but was dependent upon each patient's individual needs and diagnosis (i.e. physical therapist, psychologist, social worker, pathologist, specialty physicians as well as other nurse practitioners, to name a few). To have us, the nurse practitioners, be forced to have a formal collaborative agreement is both unfair to us, as well as the physician whom we are signing with. Not to mention most physicians are not open to signing a formal agreement, for the concern of additional liability on their end. Even though, as providers, we do already take full responsibility and liability for our decisions and actions in the care we provide. Most physicians who are willing to sign for us, will do so for a monetary cost. Otherwise, what is their incentive to do so? It is not always affordable for us, as Nurse Practitioners, to have to pay out additional funds just to have a signed collaborator. The fees being requested by the signing physician is not always truly reflective of the amount of resources they are or need to provide to us. This cost ultimately effects the patients, by providing a barrier of access to (affordable) care from us. With our State's current Act, we are allowed to practice without a physician present in the office, nor are we required to have them review or sign off on any of our charts. We can also bill directly for third party payments, have our own Medicare/Medicaid #, have our own DEA # for prescribing medications, and be listed on patient's health insurances as their Primary Care Provider. Again, none of this will change with the above proposed request.

As an experienced & educated healthcare professional, I am aware of my knowledge, level of expertise and limitations, and when it is necessary to call upon or 'collaborate' with another

healthcare provider. I find it disheartening that in order for me to provide professional healthcare to my patients, I am required to function under and have to 'pay' for a signed agreement. But paying for "it" is the only incentive available to get a physician to sign. I believe the original intent of requiring a signed "collaborative" agreement was to ensure the safety of the patient. Instead, it has become more of a cost prohibitive factor for us, which ultimately keeps us from practicing independently and being available for the patients.

It was brought to my attention by a fellow colleague in 2011 that the Connecticut State Medical Society did offer an 'APRN Assist' program for Nurse Practitioners who are interested in establishing a Physician Collaborator. In March 2011 I did make at least 2 telephone calls to the CSMS and left messages for the contact person whom I was told I needed to speak with, but had not heard back. After a couple of weeks, I did then call back and requested an email address for this contact person. I did send an email explaining what my interest was and hoping to receive some guidance on how to go forward. About 6 weeks later I received a return email, in which she did apologize for not responding sooner. Her email informed me that a family physician in my home town was currently looking for an APRN to join his practice and she was "not sure if this is the type of agreement you may be interested in." I did respond thanking her for thinking of me, but no, this was not the type of agreement I was looking for. I was not looking for a job or employment, but looking to open a nurse practitioner skin care practice. I found this communication to be discouraging, since this person was supposed to be my contact for the APRN Assist program and did not seem to have an understanding of what that program is supposed to offer.

Have you or any of your family members ever received care from a Nurse Practitioner? If so, did you feel comfortable with their assessment, findings and treatment plan? I feel competent about the care I provide to my patients, and treat each and everyone the same as I would a family member. This is not just a job for me, but truly a passion for what I do...caring for the patient. I believe this to be the practice of my all my fellow Nurse Practitioner Colleagues as well.

My request to you, The Public Health Committee, is to please sponsor the above Raised Bill, HB 6391. I think it is time to make some positive changes in healthcare, which can ultimately affect affordable and accessible care to our patients here in the State of Connecticut.

Thank you for your time and consideration.

Respectfully,

Lenore Crosson, MSN, APRN
